

**GOVERNMENT OF INDIA  
HEALTH AND FAMILY WELFARE  
LOK SABHA**

UNSTARRED QUESTION NO:2172

ANSWERED ON:24.08.2012

FUNDING UNDER NRHM

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**Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:**

(a) whether the Union Government proposes to reduce quantum of funds allocated under the National Rural Health Mission (NRHM) to the States who fail to perform in terms of deployment of doctors, nurses and other para-medical staff etc. and other Health Index/parameters;

(b) if so, the details thereof;

(c) whether the Government has introduced any incentive schemes for the States who perform well under NRHM;

(d) if so, the details thereof; and

(e) the other steps taken or being taken by Government for speedy and result oriented implementation of NRHM?

**Answer**

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY)

(a) & (b): Yes. The overall State outlay of NRHM may be reduced by upto 7.5% in States which fail to rationally deploy human resources such as doctors, nurses, paramedical staff etc with highest priority to high focus districts and delivery points.

(c) & (d). Under NRHM, incentives have been fixed in order to encourage States to undertake health sector reforms such as transparency, responsiveness, quality assurance, inter-sectoral convergence, strengthening of civil registration system, creation of public health cadre etc. as per details given below:

Sl no	%	Incentive	Criteria
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1	Upto 8% of total outlay under NRHM	Responsiveness, transparency and accountability
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2	Upto 3% of total outlay under NRHM	Quality assurance
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3	Upto 3% of total outlay under NRHM	Inter-sectoral convergence
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4	Upto 2% of total outlay under NRHM	Recording of vital events including strengthening of civil registration of births and deaths
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5	Upto 10% of total outlay under NRHM	Creation of a public health cadre
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6	Upto 5% of total outlay under NRHM	Policy and systems to provide free generic medicines to all in public health facilities
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(e) Under NRHM, State specific targets have been fixed for outcome/impact indicators, such as, IMR, MMR, TFR etc as well as for service delivery indicators in order to ensure effective implementation. These are being monitored through mechanisms like, Common Review Mission (CRM), Integrated Monitoring Team Visits, Regional Evaluation Team (RET) etc. Further, evidence based interventions such as Home Based New Born Care (HBNC), Janani Shishu Suraksha Kariyama (JSSK), Facility Based Newborn Care (FBNC) etc are promoted under NRHM in order to achieve speedy and result oriented implementation.